

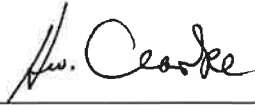


**Report on the Response of
the Virginia Department of Corrections
to the Impact of the Aging of Virginia's Population**

**Virginia Department of Corrections
November 14, 2014**

SIGNATURE PAGE

Pursuant to Code of Virginia §§ 2.2-5510 and 51.5-136, the Virginia Department of Corrections submits this report of its progress in addressing the impact of the aging of Virginia's population.



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EXECUTIVE SUMMARY

The Report on the Response of the Virginia Department of Corrections to the Impact of the Aging of Virginia's Population provides a summary and evaluation of issues the Department faces in dealing with two primary populations of older Virginians: offenders and employees. Information was collected from a variety of sources, including published reports and plans and interviews from Department personnel.

Key findings of this report are as follows:

- The number of older Virginians in the VADOC, both offenders and employees, is increasing;
- The increase in the number of aging offenders, a primary cause of the Department's growing medical expenses, negatively impacts the Department budget and ultimately may compromise security and public safety if not adequately addressed;
- Training for staff on how to more effectively administer care and services to aging offenders is needed both in the institutions and in the probation and parole districts;
- Services in the community for offenders, especially older offenders, are sparse; more resources and education for offenders, their families, and VADOC staff, as well as new partnerships with other agencies that provide services, are desperately needed;
- Continuous turnover by younger security staff coupled with an increasing number of security staff retirements may ultimately jeopardize safety and security; therefore, the salaries of correctional officers should be aligned with other law enforcement officers in the state to improve retention and preserve institutional knowledge and experience; and,
- Despite having to currently close several facilities due to budget cuts, the Department is already faced with expanding specialized medical services for aging offenders at Deerfield Correctional Center, further straining the budget and operations.

Findings from this report have already generated discussions about future strategic planning functions, including more in-depth studies on these issues as well as new metrics to be included as part of the VADOC's progress toward achieving the goals of the Strategic Plan.

AGENCY DESCRIPTION

The Virginia Department of Corrections (VADOC) is Virginia's largest state agency with more than 11,000 employees. The VADOC is a model correctional agency that currently oversees the incarceration of nearly 38,000 offenders and the supervision of over 58,000 offenders in the community.

The Department incarcerates offenders in 26 major facilities, eight correctional field units, six correctional work centers, and two units in regional hospitals. The Department's community-supervised population is managed in three detention centers, three diversion centers, and 43 probation and parole districts in the community.

The Code of Virginia sections establishes the Virginia Department of Corrections:

1. COV §53.1-8 establishes the Department of Corrections as an executive department responsible to the Governor.
2. COV §53.1-20 provides for convicted persons to be committed to the custody of the DOC for incarceration.
3. COV §53.1-140 et seq. establish the powers and duties of the DOC Director to divide the Commonwealth of Virginia into probation and parole districts to serve the Virginia Parole Board and the Circuit Courts in the management and supervision of offenders in the community.
4. COV §53.1-67.7 authorizes the DOC to establish Diversion Centers
5. COV §53.1-67.8 authorizes the DOC to establish Detention Centers

The mission of the VADOC is as follows:

We will enhance the quality of life in the Commonwealth by improving public safety. We will accomplish this through reintegration of sentenced men and women in our custody and care by providing supervision and control, effective programs and re-entry services in safe environments which foster positive change and growth consistent with sound correctional principles, fiscal responsibility and constitutional standards.

The VADOC role is one of improving long term public safety through the successful reintegration of offenders into society.

INFORMATION REQUESTED

1. *If your agency has undertaken any actions to respond to the current and future impact of an aging population, such as needs assessments, strategic planning, or use of best practices, please briefly describe those actions. Please indicate what assistance from DARS could help your agency as it prepares to serve an aging Virginia population.*

The Virginia Department of Corrections (VADOC) works primarily with two groups of aging Virginians: offenders and employees.

In terms of aging offenders, the Statistical Analysis and Forecast Unit at the VADOC publishes a report titled “Geriatric Offenders within the SR [State Responsible]¹ Population” every year. This report is used by the Executive Leadership at the VADOC and policymakers for planning purposes.

The July 2014 report highlights the increase in offenders age 50 and older² since FY1990. A key finding of the report is that the increase in the number of geriatric offenders in the VADOC has been dramatic. From FY1990 to 2013, Virginia’s state responsible (SR) confined population age 50 and older increased from 822 to 6,709, or 18% of the SR confined population.

This report also examines the effect of healthcare issues for geriatric offenders and the VADOC’s use of the Deerfield Correctional Center, which is dedicated to housing special needs offenders. While Deerfield is designed to care for male offenders of any age with special needs, a large part of this group is older offenders. Only 28 offenders at Deerfield (3%) were under the age of 40 in FY2013. More than half of Deerfield’s population was between the ages of 40 and 59 and another 28% of Deerfield’s offenders were 60 years-old or older. With the added medical needs of its confined offenders, Deerfield is more expensive to operate than other medium security dormitories (MSD). The FY2013 per capita expense at Deerfield was \$33,265, while other MSDs average \$21,314 per capita.³ Because of the growing number of geriatric confined offenders, increasing medical costs, and the possibility of longer lifespans with improved medical care, geriatric confined offenders are expected to increase the strain on the Department’s budget.⁴

The VADOC, like most agencies, is managing an aging workforce. A number of issues face management in relation to aging employees: discrimination against older workers, productivity, workforce development, succession planning, and retirement. To assist the Executive Leadership at the Department in planning for issues related to an aging workforce, the Human Resources office at the VADOC publishes a workforce planning report annually. This report tracks the demographics, including age, of each category of employee. A trend analysis of all employees

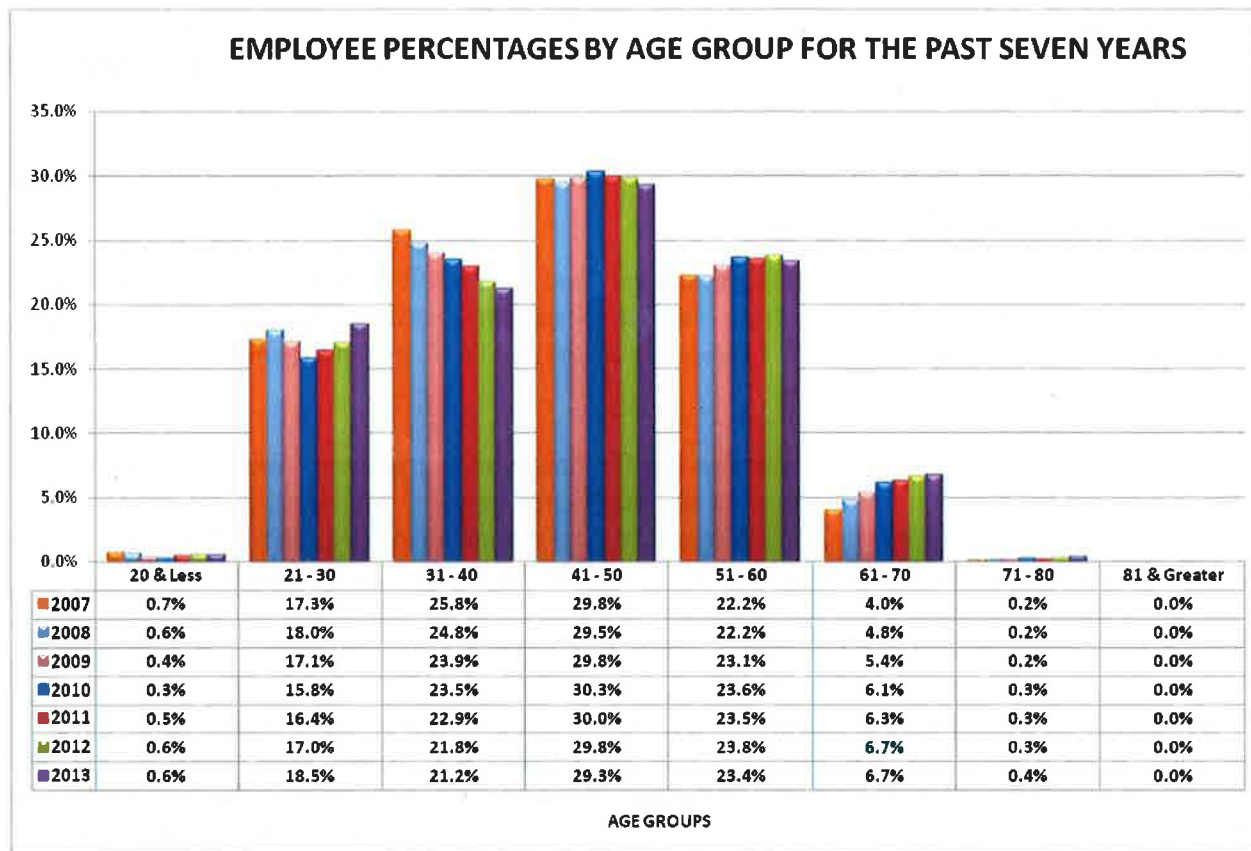
¹ Per Central Classification Services, a State Responsible offender is an individual who has been sentenced to be incarcerated for at least one year through the VADOC, but who may be housed in either a DOC institution or a regional jail.

² In the corrections field, inmates age 50 and older are typically regarded as ‘geriatric’ because their previous lifestyles have tended to make these offenders age faster than non-inmates.

³ Statistical Analysis and Forecast Unit. (July 2014). *Geriatric Offenders within the SR Population*. p. 5.

⁴ Statistical Analysis and Forecast Unit. (July 2014). *Geriatric Offenders within the SR Population*. p.1.

of the VADOC shows that, while the largest, most consistent age group has been the 41-50 group, there has been a slight increase in the 51 – 60 and 61 – 70 age groups:⁵



Two key findings of the most recent workforce planning report are 1) that, since FY2007, the average age of the Department's workforce has increased to 43.6, and 2) the top two age groups for the Department's employees are 41 – 50 (29.8%) and 51 – 60 (23.8%). Additionally, employees in the Virginia Law Officers' Retirement Systems (VaLORS) with 25 years of state service are expected to increase from 4.35% in January 2013 to 7.20% in January 2015 to 9.65% in January 2017. Non-VaLORS employees with 30 years of state service are expected to increase from 6.36% in January 2013 to 8.13% in January 2015 to 11.24% in January 2017. These trends indicate that the employee population of the VADOC is increasingly aging and that the Department will most likely be facing a large number of retirements over the next five to 10 years.⁶

One of the main goals of the Department's strategic plan is to create innovative partnerships with other agencies. In terms of aging offenders, the Department for Aging and Rehabilitative Services (DARS) could assist the VADOC by providing educational resources to supplement existing training on managing geriatric offenders, both in the institutions and in the probation and parole districts. DARS could also provide educational resources to geriatric offenders and

⁵ Human Resources Office. (2013). *FY2013 Workforce Planning Report*. p. 13.

⁶ Human Resources Office. (2013). *FY2013 Workforce Planning Report*. p. 2-3.

their families upon the offenders' release back into the community that will assist them with finding housing and employment resources, provide information on independent living, and educate families on suicide prevention. Providing these resources to older offenders supports the VADOC's re-entry initiatives and complements Virginia's Four-Year Plan for Aging Services.

2. Briefly describe your agency's services that are used primarily by older Virginians and the funding streams (types and amounts) that support those services. If these particular services or funding streams are provided in conjunction with other state or local agencies or other for profit or non-profit organizations, please list them.

As of October 2014, the VADOC was responsible for the supervision and custody of 96,168 offenders. The community corrections side of the VADOC is currently supervising 58,183 offenders while the Department provides custody, medical and treatment services, and work programs to 29,985 offenders incarcerated in institutions and approximately 8,000 SR offenders housed in regional jails. For FY2013, more than 18% of the Department's SR confined offenders were age 50 and older; yet, they accounted for 45.2% of the off-site medical expenditures.⁷

The Department's current general fund budget for medical services is \$154.7 million. However, the Appropriation Act does allow for the use of additional funds from the U. S. Department of Justice for medical as well. The funding from the Department of Justice for this fiscal year amounted to \$921,040. Additionally, the Department used nongeneral funds to acquire and install equipment to accommodate hearing impaired offenders, including older offenders, but the use of a translator for these offenders was obtained through general funds.

Recent budget reductions in the Commonwealth have put a further strain on the Department's ability to provide medical care for offenders. The Department faces a \$14.4 million shortfall in its medical budget for the current fiscal year because of the decision by its contracted medical provider to cancel its contract, forcing the VADOC to sign an emergency contract with a new provider at a higher rate. Additionally, the Department has incurred higher off-site health care costs and the added expense of new medications necessary for treatment of inmates with Hepatitis C. The shortfall is estimated at \$30 million in the fiscal year that begins July 1, 2015.⁸ The Department will be submitting a funding request via Decision Package to the Governor's Office in the amount of \$14.4 million for FY2015 and an additional \$30.2 million for FY2016.

Federal law (*Estelle vs Gamble* 1976) mandates the right to health care for incarcerated offenders. As there currently are no other funding sources to assist with these ever-increasing costs, the Department's ability to provide the necessary services to offenders could be compromised in the future with additional budget cuts.

The VADOC has 11,651 classified and non-classified employees, with approximately 7% age 60 and over. While there are no funding sources related specifically to older employees only, the

⁷ Statistical Analysis and Forecast Unit. (July 2014). *Geriatric Offenders within the SR Population*. p. 10.

⁸ Martz, M. (2014, October 20). Va. prison system faces \$45 million shortfall in inmate health care. *Richmond Times-Dispatch*. Retrieved from www.timesdispatch.com.

Department does provide assistive technologies needed by older employees by using the general fund budget for these purchases.

3. *Identify current agency programs specifically designed to serve older Virginians that fall into any of the following eight categories:*

- *Health Care/Wellness*
- *Education*
- *Public Safety (including Adult Abuse Prevention)*
- *Recreation*
- *Housing*
- *Accessibility (including Livable Communities <http://www.vadrs.org/vblc/>)*
- *Financial Security*
- *Transportation*

The VADOC is a public safety agency that houses and supervises sentenced felons. In order to deal with an aging offender population, security staff must receive specialized training on how to deal with issues specific to that group. In 2015, VADOC's Academy for Staff Development will be providing a new course in Alzheimer's awareness. This course will be open to all Department personnel and is designed to provide accurate, current, and practical information concerning Alzheimer's disease to correctional staff. This training will include information on how to effectively communicate with and manage offenders who have Alzheimer's disease and /or a related dementia. Additionally, two VADOC institutions, Bland Correctional Center and Powhatan Medical Unit, have a Chronic Disease Self-Management program designed to educate offenders prior to their release on how to continue any medical care once back in the community.

VADOC currently houses the majority of its older/special needs offenders at Deerfield Correctional Center, which includes an 18-bed medical infirmary that provides a skilled nursing level of health care. Additionally, three of six units at Deerfield are equipped with a nurse's station and a 56-bed Assisted Living Unit (ALU) provides 24-hour nursing care to accommodate the increasing number of offenders who need wheelchairs, walkers, canes, portable oxygen, and/or hearing aids. Other accommodations include, but are not limited to:

- Providing 24-hour sitters for an offender with dementia;
- Providing wheelchair pushers;
- Providing geriatric chairs to accommodate those in hospital beds; and,
- Providing a caregiver to assist offenders with prosthetics.⁹

Geriatric-specific programs are also offered at Deerfield, including a horticulture program; a library with large print books; assisted living services including reality orientation to check for dementia, Alzheimer's' disease, and cognitive abilities; a computer program for the blind; and a collaboration with the Library and Resource Center for the Blind and Vision Impaired to provide resources to offenders. Overall, VADOC is ahead of many states in terms of how to manage aging offenders. However, as the population of geriatric confined offenders grows, the Department will be need to expand services and staff, as well as find new housing space as the population at Deerfield is rapidly outgrowing the current infirmary and ALU.

⁹ The caregivers mentioned here—sitters, wheelchair pushers, etc.—are other offenders trained to assist with these duties as part of their work program.

When incarcerated offenders—including older offenders—are released into the community, VADOC staff members assist them in completing applications for federal and state benefits including veteran benefits, Medicaid, and Supplemental Security Income (SSI). Counselors work with offenders on a case-by-case basis to determine which services will be available to them upon release. Once assigned to a probation and parole district, offenders are provided assistance with finding housing, transportation, employment, and medical care. While providing this assistance to all offenders is challenging, this is particularly problematic for older offenders as adequate resources do not always exist in the community for older citizens.

The VADOC is in compliance with all state and federal laws and policies related to older employees. While the Department does not have any agency-level policies or strategies specifically designed to accommodate older employees, it does provide accommodations under the Americans with Disabilities Act (ADA) that include these individuals. The Department currently uses braille translators, large print keyboards, ergonomic keyboards and chairs, the CAP Tel 840i phone system (for the hearing impaired), and screen magnification software to enlarge print on the display to accommodate any employee who needs assistive technologies and equipment to successfully perform his/her duties.

4. Is your agency able to meet all of the service demands of older Virginians for the services listed above? If there are any instances where the demand for services exceeds your agency's ability to meet the demand, please indicate the service and the extent of the unmet demand. Also, if your agency maintains waiting lists for services, please provide this information, including the waiting list numbers for each service.

In order to meet the needs of a growing population of geriatric confined offenders, VADOC needs to create new infirmary units, assisted living sites, and a memory unit. While the VADOC has a master facility plan for the expansion of Deerfield Correctional Center, funding has not been available to address the institution's growing need. Currently, the Department is developing plans to create an institutional nursing home setting that would better house aging offenders offsite. However, obtaining the necessary funding, finding the space, and hiring the staff for such a facility are problematic in the face of budget cuts already forcing the VADOC to close institutions. Additionally, Deerfield is already in need of a dementia unit where these offenders, who can at times become aggressive and hard to manage in a regular institutional setting, could be better supervised and better managed with more staff to tend to their special issues.¹⁰

Older offenders also pose specific challenges to successful re-entry. Finding housing, transportation, and employment for any convicted felon, especially for older offenders, is very difficult. There is an increasing number of medically and mentally disabled offenders returning to the community, yet there is a shrinking number of Assisted Living Facility (ALF) beds and an inadequate number of Medicaid nursing home beds.¹¹

¹⁰ F. Schilling, Health Services Director, personal communication, November 7, 2014.

¹¹ Statistical Analysis and Forecast Unit. (July 2014). *Geriatric Offenders within the SR Population*. . p.6.

Older confined offenders are proportionately more violent. Eighty percent of older confined offenders were sentenced for violent crimes, such as rape, sexual assault, and first degree murder.¹² Upon release, these offenders may not qualify for the same housing or employment opportunities as their younger counterparts. Most nursing homes refuse to accept offenders who are sex offenders.¹³ Furthermore, many older offenders need assistance with obtaining prepared meals, transportation for medical appointments, prescription medications and medical equipment such as wheelchairs, canes or walkers, and training in using basic technologies such as cell phones, ATMs and debit cards, and touch screens. Probation and parole district staff members have also identified the need to find constructive leisure activities for geriatric offenders as an important yet unmet need in the community.¹⁴

Finding housing and transportation for older offenders puts a strain on staff as well as on the limited resources available in the community. While VADOC works closely with the Department of Social Services and local agencies in meeting these needs, more could be done to ensure that released older offenders receive the assistance and services so desperately needed.

5. Provide the number of persons, by gender if available, who received services from the agency in each of the past five state fiscal years (FY 2010 through FY2014) who fell into the following age ranges: 60-64; 65-74; 75-84; and 85 and older. If your agency lacks specific information about the numbers of older Virginians it serves but has other evidence indicating that it is serving more or fewer older Virginians than it has in the past, please describe the basis for that estimation.

The VADOC tracks annually the number of state responsible confined offenders by age group.¹⁵

State Responsible Confined Population FY2009-FY2013

Age Group	FY2009		FY2010		FY2011		FY2012		FY2013	
	No.	Total	No.	Total	No.	Total	No.	Total	No.	Total
Under 18	42	<1%	36	<1%	21	<1%	10	<1%	16	<1%
18 - 24	5,191	14%	4,920	13%	4,826	13%	4,590	12%	4,306	12%
25 - 29	6,593	17%	6,420	17%	6,194	17%	5,926	16%	5,705	16%
30 - 34	6,152	16%	6,172	16%	6,227	17%	6,300	17%	6,123	17%
35 - 39	5,236	14%	5,073	13%	4,936	13%	4,849	13%	5,083	14%
40 - 44	5,159	13%	4,985	13%	4,776	13%	4,591	12%	4,489	12%
45 - 49	4,544	12%	4,473	12%	4,421	12%	4,371	12%	4,216	12%
50 - 54	2,786	7%	2,933	8%	2,979	8%	3,150	9%	3,232	9%
55 - 59	1,477	4%	1,534	4%	1,664	4%	1,709	5%	1,926	5%
60 - 64	631	2%	722	2%	784	2%	823	2%	912	2%
65 & Over	455	1%	508	1%	539	1%	601	2%	639	2%

¹² Statistical Analysis and Forecast Unit. (July 2014). *Geriatric Offenders within the SR Population*. . p. 10.

¹³ S. Stanley, Community Corrections Regional Manager, personal communication, October 28, 2014.

¹⁴ J. Reynolds, District 24 Chief, personal communication, October 28, 2014.

¹⁵ Statistical Analysis and Forecast Unit. (May 2014). *State Responsible Offender Population Trends, FY2009-FY2013*. p. 7.

Additionally, the Statistical Analysis and Forecast Unit provides a breakdown of geriatric offenders by gender:

State Responsible Offenders by Gender and Age Group¹⁶

	June 30, 2010			June 30, 2011			June 30, 2012			June 30, 2013			June 30, 2014		
	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total	Male	Female	Total
SR Confined*															
Under 60	33,938	2,606	36,544	33,446	2,598	36,044	32,927	2,569	35,496	32,452	2,644	35,096	33,006	2,927	35,933
60-64	695	24	719	754	30	784	785	38	823	870	42	912	974	50	1,024
65-74	434	13	447	448	22	470	515	17	532	536	16	552	591	19	610
75-84	63	--	63	65	--	65	64	--	64	82	--	82	86	1	87
85+	3	--	3	4	--	4	5	--	5	5	--	5	5	--	5
Total 60+	1,195	37	1,232	1,271	52	1,323	1,369	55	1,424	1,493	58	1,551	1,656	70	1,726
SR															
Community**															
Under 60							42,275	12,364	54,639	42,444	12,556	55,000	43,000	12,953	55,953
60-64							1,157	259	1,416	1,049	221	1,270	976	195	1,171
65-74							761	108	869	658	111	769	612	95	707
75-84							117	16	133	106	14	120	96	11	107
85+							11	--	11	7	--	7	8	--	8
Total 60+							2,046	383	2,429	1,820	346	2,166	1,692	301	1,993
Total Offenders Served															
Under 60							75,202	14,933	90,135	74,896	15,200	90,096	76,006	15,880	91,886
60-64							1,942	297	2,239	1,919	263	2,182	1,950	245	2,195
65-74							1,276	125	1,401	1,194	127	1,321	1,203	114	1,317
75-84							181	16	197	188	14	202	182	12	194
85+							16	--	16	12	--	12	13	--	13
Total 60+							3,415	438	3,853	3,313	404	3,717	3,348	371	3,719

*SR Confined data reflect all state responsible offenders confined on June 30 of the specified fiscal year.

**SR Community data reflect all offenders on state responsible community supervision on June 30 of the specified fiscal year. Data prior to FY2012 were not reported.

¹⁶ Statistical Analysis and Forecast Unit. (November 2014). *State Responsible Offenders Age 60+*. p. 2.

As is commonly occurring in the United States, Virginia is seeing an increase in the number of geriatric citizens. The VADOC mirrors this trend and is seeing an increase in geriatric confined offenders, which means more healthcare costs and more strain on the Department's budget.¹⁷

The Department of Corrections Workforce Planning Report tracks the number of employees by age group annually:

VADOC Employees by Age Group

Age Group	Employed 2007	Employed 2008	Employed 2009	Employed 2010	Employed 2011	Employed 2012	Employed 2013
20 & Less	91	78	51	38	58	66	65
21 - 30	2104	2244	2061	1833	1895	1980	2153
31 - 40	3129	3093	2890	2718	2643	2531	2474
41 - 50	3615	3677	3602	3507	3458	3465	3409
51 - 60	2700	2770	2782	2737	2712	2767	2721
61 - 70	488	595	652	711	727	778	786
71 - 80	19	24	29	31	29	39	42
81 & Greater	3	2	2	1	2	2	1
Total	12149	12483	12069	11576	11524	11628	11651

While the number of older employees remains relatively small in proportion to the rest of the Department, one can reasonably assume that over the next five to 10 years the employees currently ages 51-60 will begin retiring at numbers that may strain Department operations.

6. Referring to the services or funding you described in item two, describe any services or funding provided to older Virginians for which the accessibility or availability varies considerably in different parts of the Commonwealth.

Older offenders with mobility, medical, hearing, vision, and/or dietary problems create special housing and care struggles for the VADOC. These offenders may also be vulnerable and need protection from victimization by younger and/or healthier offenders. Physical and mental health limitations create challenges for providing programming and treatment.¹⁸ While the Department is currently managing these offenders, as this number increases the Department will need to expand the specialized services provided at Deerfield, at an increased cost to the agency.¹⁹

Furthermore, as more geriatric offenders are released to the community, the Department faces challenges in finding adequate housing for these individuals. In addition to competing with other citizens for beds in nursing homes, geriatric offenders face additional challenges as older offenders tend to be proportionately more violent (i.e. were incarcerated for a violent crime) and, therefore, may not be eligible for some housing opportunities as a result. Probation and parole districts also struggle with finding transportation services for older offenders to take them to required probation meetings and medical appointments, especially in rural areas where public transportation is limited.

¹⁷ F. Schilling, Health Services Director, personal communication, November 7, 2014.

¹⁸ Statistical Analysis and Forecast Unit. (July 2014). *Geriatric Offenders within the SR Population*. p. 7.

¹⁹ F. Schilling, Health Services Director, personal communication, November 7, 2014.

As noted in question #3, while the Department does not have any agency-level policies or strategies specifically designed to accommodate older employees, it does provide accommodations under the Americans with Disabilities Act (ADA). As the Department's number of older employees increases, it stands to reason that the amount of funding needed to adequately accommodate the special needs of older employees will need to be increased.

7. Over the next five to 10 years, in what ways do you anticipate that an aging population will impact your agency's services, funding streams, or policies? Consider the impact from an increase in the number of older Virginians and whether the needs of older Virginians will differ from those of today's older adults. Please include any anticipated impacts upon the cost of services, changes in type of services or the manner of service delivery, or modifications to agency policies, staffing needs, or procedures.

As previously mentioned, the VADOC faces increased per capita medical costs as well as the potential need to increase bed space for aging incarcerated offenders. Since the Department is currently being forced to close institutions due to the Commonwealth's budget crisis, the impact of these additional costs may be devastating to the VADOC's budget over the next five to 10 years.

The VADOC has already identified two issues with workforce retention that will become more critical as the current population of employees age. More than 50% of senior staff, such as wardens, probation and parole district chiefs, unit heads, etc., are eligible to retire with unreduced retirement benefits over the next five years. Likewise, more than half of the Executive Leadership of the VADOC could also retire over the next five years. Therefore, it is feasible that within the next few years, the entire leadership structure of the Department may be substantially different than it currently exists.

Furthermore, younger security staff members tend to have higher rates of turnover in the institutions because of a relatively low pay scale while officers in the older age groups tend to be more stable and stay employed with the Department longer. Therefore, as older security officers retire, the Department will not only lose that pool of institutional knowledge and experience, but also will be unable to replace this knowledge and experience as younger officers leave to find better pay. If this trend continues unchecked, the Department could face a significant shortage in security staff in the future, which will jeopardize operations and public safety. Policies affecting the pay scales of correctional offices in the Commonwealth should be reviewed and revised by the Virginia Department of Human Resource Management to assist the VADOC in retaining these employees in the face of increasing retirements.

8. Please describe the primary steps that should be taken at the federal, state, or local levels to meet the future demands of older Virginians and to make services delivery more effective and efficient.

VADOC's medical expenses should be fully funded to ease the impact of other areas affected by drastic cuts in the Department's budget, such as staffing, physical security, or re-entry programs. Without this funding, the VADOC will be forced to make other budget cuts, such as reducing

staff or closing prison facilities, which may negatively impact public safety in the Commonwealth.

In terms of employees, the Virginia Department of Human Resource Management could provide more talent management services, such as recruitment, training opportunities, and succession planning assistance, to assist the Department with preparing younger employees to replace retiring employees over the several years. Furthermore, the pay scale for correctional officers should be realigned to be comparable to other law enforcement officers in the state to assist the Department with recruitment and retention issues in the face of pending retirements.

9. Identify the extent to which your agency provides "customer-oriented" publications and websites that are designed to be "senior-friendly." If the information you currently provide is not readily accessible to older Virginians, please identify any steps your agency is taking to improve their access to this information.

Confined offenders do not currently have access to websites; however, for publications related to academic coursework and/or work in vocational programs that require computer access, the Department uses the built-in magnification tools in the operating system for the visually impaired and has purchased special keyboards for persons with limited use of an extremity. The Department follows ADA requirements to address issues with aging offenders and accessibility.

The Department's employee newsletter, *Around Corrections*, was originally constructed as a Shockwave Flash multimedia file format but was revised because the format did not work for visually impaired individuals, including older employees, as the text could not be read. Instead, the decision was made to use a format that can accommodate anyone who is visually impaired.

Both the public website and the Department intranet, iDOC, were revised to meet basic accessibility compliance. There are also additional features that will be included in future redesign work. These features include conversion to responsive design layouts, more stringent controls on minimum font sizes, and high-contrast large type style sheets. While these changes are not necessarily intended to assist solely older customers, they are intended to be ADA compliant and improve accessibility for all users.

10. Describe any other services or programs that your agency plans to implement in the future to address the impact of the aging of Virginia's population.

As mentioned in question #3, the VADOC's Academy for Staff Development will be providing a new course in Alzheimer's awareness in 2015. This training will include information on how to effectively communicate with and manage offenders who have Alzheimer's disease and/or a related dementia. As the Academy completes its annual review of curricula for security staff, staff will consider additional areas related to aging offenders that need to be included in the training of correctional officers and other institutional staff.

The Department has already begun succession planning activities. The LEAD Council has been formed and has already put into place three significant programs.

The first is the *Leadership and Development (LEAD) Program* to develop mid-level managers to be ready to move into senior level manager positions when those positions become vacant due to retirement and other separations. After identifying the leadership and managerial competencies needed for senior level positions, the Department contracted with the American Correctional Association (ACA) to provide a program to build and develop these skills.

The second program is *Smooth Start for New Supervisors*. It is a two day program for newly appointed supervisors to attend within 30 days of their appointment. The program is designed to open the window of supervision for new supervisors and expose them to the basics of supervision, answer their questions, meet with the Director's staff, and provide an orientation to the Department's Strategic Plan.

The third program is *Basic Leadership Development for the Corrections Professional*, a one week program for supervisors who aspire to be mid-level managers when those positions become vacant due to retirement and other separations.

The LEAD Council is continuing its work in conjunction with the Executive Leadership team and the Academy for Staff Development to identify additional developmental and training opportunities for senior managers who aspire to be executive level managers when those positions become vacant due to retirement and other separations.

11. *Please indicate if your agency is experiencing an increase in employees retiring later and describe any actions your agency is taking or plans to take to accommodate its aging workforce with innovative practices.*

While there are some older employees who are choosing to delay retirement, the Virginia Department of Corrections is being forced to lay off around approximately 5% of its workforce due to the state budget crisis. At this time, the Department is focused on finding positions for as many of those employees as possible. A more in-depth study of the retirement issues facing the VADOC may be planned for the future in conjunction with a revision of the Department's Strategic Plan.

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